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ABSTRACT

Each of the major approaches to psychotherapy (psychoanalytic, behavioral, cognitive-behavioral, and humanistic) has dealt with the issue of why verbal, conscious activity seems to be impotent to control feelings and behavior. In these appraoches, thinking has been equated with conscious, verbal activity and feeling with nonconscious, nonverbal activity. However, recent debate has centered on the characteristics and location of both cognitive and feeling systems. One way to view the relation of feeling to thinking is to see these two as at least partially knowing systems. The verbal knowing system is linear, flexible, and slow in its responsiveness, while the feeling system is global and holistic, and fixed, rigid, and rapid in its responsiveness. Crucial to this interpretation of the feeling system is the assumption that it processes meaning and that the conscious, verbally guided response sequences may get programmed into a nonconscious, affective level. Given these assumptions, two sources of pathologicl behavior may exist: rapid, consciously uncontrollable behavior; and articulated meanings. This perspective leads to a flexible view of psychotherapy in which articulation of meanings is needed. Articulation will lead to an integration of the two knowing systems through hypothesis testing, juxtaposition, and restructuring. (BL)

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FEELINGS IN PSYCHOTHERAPY

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Feelings in Psychotherapy

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It can be said that the problem of the conscious control of behavior is a common theme that runs throughout the major approaches to psychotherapy. If people were able to control either themselves or others through simple rational, verbal persuasion, the need for psychotherapists would be greatly diminished. Generally, clients come to psychotherapy when their conscious, verbally formulated perceptions of their goals and values conflict with either their behavior or their feelings, and when they have been unable to bring the behavior and/or feelings "in line" with the verbally formulated goals. Something similiar occurs with clients who are not self-referred, but referred by others (such as the courts, or a child's parents). In these cases there is a conflict between the verbally formulated goals and values of the <u>others</u>, and the behavior and/or feelings of the client. Similiarly, verbal persuasive attempts by <u>others</u> to control the client's feelings and/or behavior, have typically failed if the client has been referred for psychotherapy.

Each of the major approaches to psychotherapy has dealt with the issue of why verbal, conscious activity seems to be impotent to control feelings and behavior. For Freudians the issue is repression. The true forces controlling surface feelings and behavior are hidden from consciousness. These forces are unconscious wishes, feelings, and impulses of a primitive nature. The development of conscious awareness of these forces through psychotherapy allows consciousness to assume greater control over how these primitive feelings manifest themselves in behavior. For conditioning theorists, such as Skinner and Wolpe, consciousness is kind of an epiphenomenon which simply does not have control over behavior and feelings. These are bodily events and are developed through conditioning procedures. Therapy, then, must operate directly at the bodily level, reshaping behavior and feelings via reinforcement procedures. For cognitive-behaviorists, such as Beck, Ellis, and Meichenbaum, conscious verbal activity <u>can</u> control behavior, but only through the development of good <u>habits</u> of self-speech. Problem behaviors and feelings are nonconsciously controlled, because prior dysfunctional habits of self-speech have become so automatic and "stamped in" they are hardly noticed by consciousness. For humanistic approaches, such as client-centered therapy and Gestalt therapy, the problem is that conscious verbal activity has tried to over-control the feeling-experiential level. At the conscious, verbal level the person is telling themselves what they should or should not feel. The result is that feelings are ignored, or their nature distorted to fit a conscious, verbal image.

There are two dimensions implied in the discussion so far. One is "consciousness" - "unconsciousness" (or "non-consciousness"). The other is "thinking" ("verbalization") - "feeling." These dimensions are not perfectly parallel. However, generally thinking has been equated with conscious, verbal activity, and feeling with nonconscious, nonverbal activity. Feelings are generally seen as having a nonconscious component in one of two ways. Either, as with humanistic theory, one may not be aware of one's feelings at all; or, as with Freudian theory, behavioral theory, and self-perception theory and its variants (see Marshall & Zimbardo, 1979), one may be aware of the feelings but not of their causes. However it should be pointed out that thinking also appears to have its nonconscious components (see Nisbett & Ross, 1980; Posner, 1982, Shevrin & Dickman, 1980). Zajonc (1980) has recently argued that cognition (thinking) and feeling are partially independent systems. The process that generates feeling is generally rapid, nonverbal and nonconscious, and does not involve cognition (or involves it only minimally). Zajonc also describes the feeling system as holistic, relatively irreversible, and as possibly being located in the right hemisphere. In contrast, the cognitive system is slow, verbal, and possibly located in the left hemisphere. Lazarus (1982) has taken issue with Zajonc, and has argued that Zajonc has essentially equated cognition with rationality. Lazarus argues that feelings do involve cognitive appraisal, that this happens very quickly in many cases, and that it is frequently a nonconscious event. It should also be pointed out that some of the properties ascribed by Zajonc to the feeling system are seen as part of the psychological unconscious by both Shevrin & Dickman and Posner. These include the view of the unconscious as holistic, and relatively quick and script-like in its responses.

The debate between Zajonc and Lazarus shows no signs of being resolved (see 39, #2, 1984 issue of the American Psychologist). It seems to me that one way to view the relation of feeling to (conscious) thinking is to see these two as at least partially separate knowing systems. In this I am siding with Lazarus in seeing the feeling system as dealing with meaning in some way or the other, and I am siding with Zajonc in seeing the conscious, verbal "knowing system" as at least partially independent of the feeling system. I therefore postulate two knowing systems. One is the conscious, verbal knowing system. This system is linear, flexible, and rather slow in its responsiveness. The second is the feeling system. This system is global and holistic, relatively fixed and rigid in its responsiveness, and relatively rapid.

Crucial to this assumption is a picture of the affective or feeling system as involving meaning. It assumes there is a rapid, nonverbal processing of meaning, which leads quickly and directly in many cases to emotional responses. Zajonc (1980) for instance notes early in the article that the reader has probably already decided whether he/she agrees with the article or not. This is what Zajonc refers to as a preference, or a

like/dislike reaction. Such quick global like/dislike experiences seem to be common. Yet certainly such an experience must involve the processing of meaning, if one quickly globally likes or dislikes an article. Yet one may have a difficult time articulating the basis for this quick and global reaction. Thus I assume that the verbal knowing, or articulating system, is somewhat independent of the affective system but that the affective system nevertheless processes meaning.

This assumption is compatible with both Freudian and humanistic perspectives, which believe in nonconscious, or unarticulated meaning as being linked to and residing in the affective system. I also assume that behavior is linked more directly to the affective system. If the affective system is seen as including nonconscious meanings, then things like "scripts" (Nelson, 1981) may be stored in this system. Scripts include complex action sequences that may or may not be directly accessible to verbal articulation. Thus behavior sequences may be triggered off without the person being able to consciously articulate the exact reasons for the behavior sequence. In this respect, conditioned responses would also be seen as being linked to this system.

Yet another assumption that follows from the above is that conscious, verbally guided response sequences may eventually get "programmed" into the nonconscious, affective level. Thus one may start out rehearsing an event: should I be angry about that? If this happens enough times one may simply find oneself reacting angrily. In this respect it is also assumed that the conscious, verbal articulation system can stimulate affective reactions (this is similiar to Beck et. al.'s, 1979 cognitive model of depression). Thus, verbally articulating the thought that "I failed" will generate a sense of sadness or depression.

With this in mind, then, there appears to be two sources of pathological behavior. At the affective level there may be rapid, consciously uncontrollable behavior or feeling responses set off by the immediate stimulus situation. These would include both conditioned responses as well as more complex, script-like sequences. The second source is articulated or verbalized meanings which feed back into the affective system. These will include negative self-attributions ("I am no good") as well as other kinds of "dysfunctional" cognitions ("things are hopeless"). If rehearsed frequently enough, these cognitions can become "automatic" and quickly and rapidly generate negative affect or behavior.

This perspective leads to a flexible view of psychotherapy. It suggests in some cases that behavior therapy, which operates directly on the affective knowing system may be the most appropriate approach. However, because the affective system is a knowing system, it contains nonconsciously held values and other means of construing reality. These may be too complex to be dealt with in conditioning terms. In these cases some articulation

of these nonconscious meanings appears to be needed. I have already pointed out that it is no simple matter for oneself to consciously, verbally "tell oneself" at the feeling level how to feel or behavior, and have anything happen. Nevertheless a variety of therapies attempt to proceed verbally; that is, by trying to verbally impact on the affective level. What appears to be a common first step in the Freudian, humanistic, and cognitive-behavioral approaches, is not an attempt to (speaking metaphorically) order the feeling level around; but rather, to attempt to articulate it. First, the meanings embedded in it must be discovered. These meanings are not so much discovered by a strictly conscious intellectual analysis of what they must be. Instead, they are uncovered or emerge as one tries to articulate them. In psychoanalysis interpretations that occur too early, for instance, are useless. Interpretations are effective if they just anticipate what is becoming conscious From my perspective this is the same as saying that the patient tries to articulate immediate, but almost accessible nonverbal meanings. Gendlin's (1968) description of experiential responding in client-centered therapy is quite compatible with the current discussion. Finally, Beck et. al. (1979) from a cognitive perspective have clients practice articulating what must be the automatic thoughts that precede a particular emotional reaction.

What then is the therapeutic process that occurs because of this articulation? In an already speculative paper I will be more speculative and suggest that this articulation leads to a temporary integration of the two knowing systems, in reference to the particular issue being dealt with. I do not know how this integration takes place. However, I believe that somehow the following factors are involved. First, an articulating of a nonconscious meaning allows consciousness to "hypothesis test" on it. This occurs both for psychodynamic perspectives ("Are you a little child now? Do you need to feel as you did then?") and for cognitive perspectives, where specific experiments may even be set up. This hypothesis-testing can lead to direct experiences which disconfirm the meaning stored at the affective level, and thereby change that meaning. Another possible way for integration to take place is that the articulation of nonverbal meanings leads to a juxtaposing of them with other contradictory nonverbal meanings ("I want to but I'm afraid"), or a juxtaposing of them with previously articulated verbal meanings ("how I think I should be"). As the individual compares and contrasts the different meanings, eventually a restructuring, or reframing takes place in such a way that a new structure for dealing with the world emerges, in which the contradiction between the elements is at least partially resolved. This structure then must feedback into the affective level. As an analogy to this kind of restructuring I propose the kind of process that supposedly occurs (see Cowan, 1978) as a child masters conservation. First the child focuses on the heighth of liquid in a glass, then on the width, then eventually re-frames the problem and develops the concept of conservation of quantity.

A final comment. This paper is based on the observation that all the major systems of psychotherapy deal with the

problem of why conscious verbal self-direction seems to be so impotent in guiding behavior and feelings. However it should be pointed out that clients are precisely the people who have this difficulty. If conscious verbal self-direction had been successful, most voluntary clients would never have come to therapy. Thus, therapists only see individuals for whom verbal self-direction has been ineffective. It would be a mistake, however, to assume from this that verbal self-direction is ineffective for everyone.

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